

<b>CLAIMS ONLY</b>							SERIAL NO. _____  APPLICANT(S) _____	FILING DATE _____			
<b>CLAIMS</b>											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
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TOTAL IND.	7	↓		↓		↓		TOTAL IND.	↓		↓
TOTAL DEP.		←		←		←		TOTAL DEP.	←		←
TOTAL CLAIMS	70							TOTAL CLAIMS			

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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